

Indicate your assessment of each category below by placing your **initials** in the blank next to your selection:

III. Program/Course Title

- A. Is the title of this program acceptable to the industry?

Initials: Yes_____ No_____ Questionable_____

IV. Program/Course Objective

- A. Is the program objective clearly stated?
B. Does the time required for completion of the total program seem reasonable in relation to the program objective?

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

V. Curriculum (specific courses)

- A. Are the course objectives clearly stated?
B. Is the content of the courses adequate to meet the stated objectives of the program?
C. Is the content of each course adequate to meet the stated objective of each course?
D. Is the sequence of subject matter and related activities suitable for the attainment of the specific objectives?
E. Are safety precautions required?
 If yes, do they seem adequate?
F. Is the equipment and supply list satisfactory for meeting the needs of business or industry?
G. Is the theory allotted each subject sufficient to support practical or lab activities?
H. Does the curriculum provide specific and related knowledge necessary for occupational competence at an entry level with minimum supervision?
I. Are prerequisites or entry requirements adequate to meet program objectives?
J. Does curriculum provide for adequate skill development through meaningful activities?
K. What can a student who has completed a program of this nature expect to earn upon entry into this occupational field?

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

Initials: Yes_____ No_____ Questionable_____

\$_____

VI. Please comment on those items checked with "NO" or "Questionable."

(Use a separate page if additional space is needed.)

VII. Recommendation:

Initials: _____Approval

Initials: _____Non-approval of Program/Stand Alone Course in current form

The undersigned agrees there exists no personal or business relationship with the school or owner(s) and agrees not to make copies or divulge any of the content of the program or course materials evaluated.

Signature

Date